

Overview: Mental Retardation Services System Study

Behavioral Health Care Subcommittee October 17, 2007

Department of Mental Health, Mental Retardation and Substance Abuse Services

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Status of the MR System

- Three-pronged system:
 - Greatest resources to training centers (\$126,841/person)
 - Fewer resources to MR Waiver (\$63,296/person)
 - Little to no resources to non-Waiver community residents

(figures not available)



Authorization for the Study

- 2006 budget language authorized a study of the Mental Retardation Home and Community-Based Waiver
- Expanded in 2007 budget to include a full study of the entire Mental Retardation Services System

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Study Design

Key areas of the study:

- Person-centered, individualized supports
- Behavioral consultation services
- Skilled nursing services
- Medical services
- Employment, housing and other specialized supports
- Examination of other states' models of supports



Study Design

Coordination, general direction and guidance:

- MR System Study Steering Committee
- The Advisory Consortium on Intellectual Disabilities (TACID)

Information gathering:

- Six topical focus teams
- · Multiple regional discussion groups
- Telephone survey of Waiver & waiting list individuals/family members

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Study Findings: Current Strengths of the System

- Choice of community or facility setting in which to receive Medicaid–funded services. The MR Waiver also offers choices of services and service providers
- The portability of MR Waiver slots
- The flexible management of resources tailored toward individual needs
- An ethical and efficient distribution of Waiver resources to individuals on the wait list



Study Findings: Current Strengths of the System

- Peace of mind for families of individuals with challenging medical or behavioral needs who reside in state training centers
- Individualization of services available to those who receive Medicaid-funded supports
- Utilization of training centers as regional resource centers for community members
- Some support for community residents not on MR Waiver through:
 - local funding,
 - another Medicaid Waiver.
 - the Department of Rehabilitative Services, or
 - a local philanthropy

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Gaps and Barriers in the Current System

- Need for funding of more MR Waiver Slots and enhanced reimbursement for MR Waiver services
- Limited provider capacity for certain services and in particular areas
- Lack of affordable housing statewide
- Lack of support for paid employment opportunities in the community
- · Aging, less than safe state training centers



Gaps and Barriers in the Current System

- Insufficient and unaffordable medical services for community residents
- Insufficient services for persons with both a mental health and intellectual disability
- · Person-centered practices only in pockets
- Few to no supports for individuals in the community without Waiver funding
- Gaps in systematic transportation services

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CMS Funding Initiatives

- Federal initiatives that may facilitate some desired outcomes of the study, but also need support to succeed:
 - Systems Transformation Grant
 - Money Follows the Person Demonstration



Recommendations for System Change

- Person-Centered Practices set tone for transforming system
- Improvements to infrastructure and quality

Recommendations:

- Made without regard to budget constraints and competing priorities for the Governor and General Assembly
- 21 priority recommendations (5 core recommendations)
- 9 to improve employment services and opportunities
- 4 for health and safety
- 2 to improve housing opportunities

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Recommendations for System Change

 Any Recommendations for funding included in this presentation are made without regard to budget constraints and competing priorities for the Governor and the General Assembly



Five Core Recommendations

#1

- Fund MR Waiver slots for 800 individuals per year for the next four biennia
- Fund the start-up of each of the 800 slots
- Fund a statewide assessment tool
- FY 2009 \$30,880,000
- FY 2010 \$58,608,000

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Five Core Recommendations

#2

- Invest in community infrastructure for those exiting facilities and those presently in community
- Renovate CVTC and SEVTC to maintain health and safety
- FY 2009 \$13,000,000
- FY 2010 \$13,000,000



Five Core Recommendations

#3

- Re-establish commitment to support through General Fund dollars, people with intellectual disabilities who have no other avenue for support.
- FY 2009 \$40,000,000
- FY 2010 \$40,000,000

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DMHMRSAS Commonwealth of Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services

Five Core Recommendations

#4

- Provide for a 25% rate increase for all MR Waiver models of residential support of four beds or less (except "sponsored residential" homes).
- FY 2009 \$13,065,561
- FY 2010 \$13,145,443



Five Core Recommendations

#5

- Fund 125 MR Waiver slots/year for the next two biennia to enable the success of Money Follows the Person.
- Beginning in FY 2013, fund 60 crisis slots/year.
- Fund the start-up of each slot.
- FY 2009 \$4,825,000
- FY 2010 \$9,150,000

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Costs and Savings

Costs

FY 2009 - \$102,781,900

FY 2010 - \$264,925,606

Savings

Estimated federal revenue generated from full implementation - \$164,723,213